



DPW

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.: 10/604,551
Applicant(s): Robert Ehrhardt
Filed: July 30, 2003
Art Unit: 2853
Examiner: J. Huffman
Title: LABEL PRINTER WITH LABEL EDGE DETECTOR

Confirmation No.: 1550

Docket No.: 047717/274789
Customer No.: 00826

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT
37 C.F.R. § 1.121

Sir:

In response to the Office Action dated January 7, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims beginning on page 2 of this paper.

Remarks begin on page 7 of this paper.

04/18/2005 PYARD303D 00000005 160505 10604551

01 FC:1201 400.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

Application or Docket Number

10604551

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	24 minus 20 =	4
INDEPENDENT CLAIMS	2 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	7/27/04	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total	* 34	Minus	** 34 = 10
Independent	* 3	Minus	*** 2 = —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1, 13

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	4/11/05	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total	* 18	Minus	** 34 = —
Independent	* 5	Minus	*** 3 = 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR PRESENT EXTRA
Total	* Minus	** =	
Independent	* Minus	*** =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE		OTHER THAN SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	750 770.00
X\$ 9=		OR X\$18=	72 -
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	822

SMALL ENTITY		OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		OR X\$18=	180
X43=		OR X86=	2
+145=		OR +290=	2
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	180

RATE		RATE	
ADDITIONAL FEE		ADDITIONAL FEE	
X\$ 9=		OR X\$18=	2
X43=		OR X86=	410
+145=		OR +290=	410
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	410

RATE		RATE	
ADDITIONAL FEE		ADDITIONAL FEE	
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	